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CONFIRMATION NO. 4127

SERIAL NUMBER 10/643,743	FILING OR 371(c) DATE 08/19/2003 RULE	CLASS 435	GROUP ART UNIT 1644	ATTORNEY DOCKET NO. 701826-054340
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APPLICANTS

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Yes Yes

**** CONTINUING DATA *******

This appln claims benefit of 60/404,416 08/20/2002

**** FOREIGN APPLICATIONS *********IF REQUIRED, FOREIGN FILING LICENSE GRANTED** SMALL ENTITY ****

** 11/18/2003

Foreign Priority claimed	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY CANADA	SHEETS DRAWING 6	TOTAL CLAIMS 18	INDEPENDENT CLAIMS 3
35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged	<i>W.M.</i> Examiner's Signature	Initials			

ADDRESS

50828

TITLE

Purification of polyreactive autoantibodies and uses thereof

FILING FEE RECEIVED 450	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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